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INDICATION FORM**

Application Number	10/567986 /
Filing Date	8/11/2004
First Named Inventor	LANZAROTTA JOSEPH M
Title	NON-STAINING BLACK SIDEWALL
Art Unit	
Examiner Name	
Attorney Docket Number	P03040US2ABFNT

I hereby revoke all previous powers of attorney given in the above-identified application.

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**48,985**

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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature

Date

3/16/2007

Name

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Title and Company

Assistant Secretary

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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